

Form

990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 12-01-2008 and ending 11-30-2009

B Check if applicable  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

C Name of organization  
AMERICAN FARM BUREAU FEDERATION  
  
Doing Business As  
  
Number and street (or P O box if mail is not delivered to street address)  
600 MARYLAND AVE SW No 1000W  
  
Room/suite  
  
City or town, state or country, and ZIP + 4  
WASHINGTON, DC 20024

D Employer identification number  
36-0725160

E Telephone number  
(202) 406-3600

G Gross receipts \$ 33,653,860

F Name and address of principal officer  
BOB STALLMAN  
600 MARYLAND AVE SW No 1000W  
WASHINGTON,DC 20024

H(a) Is this a group return for affiliates?  
☐ Yes ☒ No  
  
H(b) Are all affiliates included?  
☐ Yes ☐ No  
If "No," attach a list (see instructions)  
  
H(c) Group exemption number ▶

I Tax-exempt status ☒ 501(c) ( 5 ) ▶(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.FB.COM

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1920

M State of legal domicile IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities  
AFBF IS THE UNIFIED NATIONAL VOICE OF AGRICULTURE WORKING THROUGH OUR GRASSROOTS ORGANIZATIONS TO ENHANCE AND STRENGTHEN THE LIVES OF RURAL AMERICANS AND TO BUILD STRONG, PROSPEROUS AGRICULTURAL COMMUNITIES

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets

3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 3

4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . . 3

5 Total number of employees (Part V, line 2a) . . . . . 11

6 Total number of volunteers (estimate if necessary) . . . . . 5

7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . . . 0

7b Net unrelated business taxable income from Form 990-T, line 34 . . . 0

Revenue

8 Contributions and grants (Part VIII, line 1h) . . . . . 0

9 Program service revenue (Part VIII, line 2g) . . . . . 24,973,144

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . . 1,256,845

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . . 134,165

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . . 26,364,154

Current Year

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . . 447,000

14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . . 12,463,198

16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . 0

b Total fundraising expenses (Part IX, column (D), line 25) ▶<sup>0</sup>

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . . 12,372,933

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . . 24,836,131

19 Revenue less expenses Subtract line 18 from line 12 . . . . . 1,528,023

End of Year

Net Assets or Fund Balances

20 Total assets (Part X, line 16) . . . . . 41,714,223

21 Total liabilities (Part X, line 26) . . . . . 4,355,024

22 Net assets or fund balances Subtract line 21 from line 20 . . . . . 37,359,199

Beginning of Year

Part II Signature Block

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer 2010-11-15 Date

RICHARD NEWPHER EXEC VICE PRESIDENT/TREASURER  
Type or print name and title

Paid Preparer's Use Only

Preparer's signature LU ANN TRAPP Date 2010-11-15 Check if self-employed ☐

Firm's name (or yours if self-employed), address, and ZIP + 4 EIN ▶ Phone no ▶ (312) 207-1040

BLACKMAN KALICK LLP  
10 S RIVERSIDE PLAZA 9TH FLOOR  
CHICAGO, IL 60606

**Part III**

**Statement of Program Service Accomplishments** (see instructions.)

**1**

Briefly describe the organization's mission

AFBF IS THE UNIFIED NATIONAL VOICE OF AGRICULTURE WORKING THROUGHOUR GRASSROOTS ORGANIZATIONS TO ENHANCE AND STRENGTHEN THE LIVESOF RURAL AMERICANS AND TO BUILD STRONG, PROSPEROUS AGRICULTURALCOMMUNITIES

**2**

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ **Yes** ☒ **No**

If "Yes," describe these new services on Schedule O

**3**

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ **Yes** ☒ **No**

If "Yes," describe these changes on Schedule O

**4**

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses  
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a**

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

FARM BUREAU NEWS PROVIDES FARMERS CURRENT INFORMATION CONCERNING LEGISLATIVE AND MARKETING MATTERS

**4b**

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

AMERICAN FARM BUREAU FEDERATION PROMOTES AND ADVOCATES FOR ECONOMIC, SOCIAL AND EDUCATIONAL INTERESTS OF ITS MEMBERS

**4c**

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d**

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )












**4e**

**Total program service expenses** \$ (Must equal Part IX, Line 25, column (B).)





Form **990** (2008)

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	1	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	4	
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 	5	Yes
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II . . . . .	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . . 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . . 	12	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the U S ? . . . . .	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I . . . . .	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II . . . . .	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III . . . . .	16	No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	18	No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21	Yes
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	22	No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J . . . . . 	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25 . . . . .	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	24d	
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .	25a	
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I . . . . .	25b	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . . .	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	No

**Part IV Checklist of Required Schedules** *(Continued)*

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . . 	Yes	
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . . 	Yes	
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . 	Yes	
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 		No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a175		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a114		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) . . . . .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		No
b	If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts . . . . .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b		No
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	5c		
6a	Did the organization solicit any contributions that were not tax deductible? . . . . .	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h		
8	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8		
9	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>			
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b		
10	<b>Section 501(c)(7) organizations.</b> Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b		
11	<b>Section 501(c)(12) organizations.</b> Enter			
a	Gross income from members or shareholders . . . . .	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	11b		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b		

Part VI

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

			Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.				
1a	Enter the number of voting members of the governing body . . . . .	1a	34	
b	Enter the number of voting members that are independent . . . . .	1b	33	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	5		No
6	Does the organization have members or stockholders? . . . . .	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . . . .	8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates? . . . . .	9a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	9b	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	10		No
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	12c	Yes	
13	Does the organization have a written whistleblower policy? . . . . .	13	Yes	
14	Does the organization have a written document retention and destruction policy? . . . . .	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official? . . . . .	15a	Yes	
b	Other officers or key employees of the organization? . . . . .	15b	Yes	
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ▶	
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ CHRISTY LILJA 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC 20024 (202) 406-3732	

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons
- ☐ Check this box if the organization did not compensate any officer, director, trustee or key employee
- | (A)<br>Name and Title                  | (B)<br>Average hours per week | (C)<br>Position (check all that apply)         |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W- 2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W- 2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
|  |                               | <input checked="" type="checkbox"/> Individual | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
| BOB STALLMAN<br>PRESIDENT AND DIRECTOR | 40 00                         | X  |                       | X       |              |                              |        | 440,915   | 0  | 66,385  |
| Ronald Anderson<br>DIRECTOR            | 2 00                          | X  |                       |         |              |                              |        | 5,900   | 0  | 0   |
| Steve Baccus<br>DIRECTOR               | 2 00                          | X  |                       |         |              |                              |        | 6,100   | 0  | 0   |
| Marshall Coyle<br>DIRECTOR             | 2 00                          | X  |                       |         |              |                              |        | 6,700   | 0  | 0   |
| Kenneth Dierschke<br>DIRECTOR          | 2 00                          | X  |                       |         |              |                              |        | 6,300   | 0  | 0   |
| Alex Dowse<br>DIRECTOR                 | 2 00                          | X  |                       |         |              |                              |        | 7,000   | 0  | 0   |
| Zippy Duvall<br>DIRECTOR               | 2 00                          | X  |                       |         |              |                              |        | 6,900   | 0  | 0   |
| Alan Foutz<br>DIRECTOR                 | 2 00                          | X  |                       |         |              |                              |        | 8,100   | 0  | 0   |
| Terry Gilbert<br>DIRECTOR              | 2 00                          | X  |                       |         |              |                              |        | 12,900  | 0  | 0   |
| John Hoblick<br>DIRECTOR               | 2 00                          | X  |                       |         |              |                              |        | 6,300   | 0  | 0   |
| Leland Hogan<br>DIRECTOR               | 2 00                          | X  |                       |         |              |                              |        | 5,900   | 0  | 0   |
| Charles Kruse<br>DIRECTOR              | 2 00                          | X  |                       |         |              |                              |        | 7,600   | 0  | 0   |
| Townsend Kyser<br>DIRECTOR             | 2 00                          | X  |                       |         |              |                              |        | 11,000  | 0  | 0   |
| Craig Lang<br>DIRECTOR                 | 2 00                          | X  |                       |         |              |                              |        | 4,000   | 0  | 0   |
| John W Lincoln<br>DIRECTOR             | 2 00                          | X  |                       |         |              |                              |        | 7,700   | 0  | 0   |
| Doug Mosebar<br>DIRECTOR               | 2 00                          | X  |                       |         |              |                              |        | 3,500   | 0  | 0   |
| Philip Nelson<br>DIRECTOR              | 2 00                          | X  |                       |         |              |                              |        | 12,100  | 0  | 0   |
- Form 990 (2008)

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Institutional Trustee	<input type="checkbox"/> Officer	<input type="checkbox"/> Key employee	<input type="checkbox"/> Highest compensated employee	<input type="checkbox"/> Former				
Jerry Newby DIRECTOR	2 00	X						3,500	0	0	
Richard Nieuwenhuis DIRECTOR	2 00	X						6,400	0	0	
Keith Olsen DIRECTOR	2 00	X						6,300	0	0	
Bob Peterson DIRECTOR	2 00	X						5,800	0	0	
Wayne Pryor DIRECTOR	2 00	X						4,900	0	0	
Stanley Reed DIRECTOR	2 00	X						4,500	0	0	
Kevin Rogers DIRECTOR	2 00	X						2,700	0	0	
Carl Shaffer DIRECTOR	2 00	X						4,000	0	0	
Mike Spradling DIRECTOR	2 00	X						5,500	0	0	
Lacy Upchurch DIRECTOR	2 00	X						5,700	0	0	
Scott Vanderwal DIRECTOR	2 00	X						5,400	0	0	
Don Villwock DIRECTOR	2 00	X						6,700	0	0	
David Waide DIRECTOR	2 00	X						4,500	0	0	
Michael White DIRECTOR	2 00	X						6,500	0	0	
David Winkles DIRECTOR	2 00	X						7,900	0	0	
Wayne Wood DIRECTOR	2 00	X						4,400	0	0	
Larry Wooten DIRECTOR	2 00	X						6,200	0	0	
BARRY BUSHUE VICE PRESIDENT & DIRECTO	40 00	X		X				18,450	0	0	
Richard Newpher EXEC VICE PRESIDENT &	40 00			X				307,868	0	68,397	
Julie Anna Potts Gen Counsel & Sec	40 00			X				214,376	0	49,373	
C David Mayfield CORP SECRETARY	40 00			X				182,867	0	42,740	
DAVID P CONOVER DIRECTOR, ADMINISTRATIVE	40 00				X			226,253	0	46,324	
MARK A MASLYN EXEC DIRECTOR, PUBLIC P	40 00				X			213,004	0	36,223	
ROBERT E YOUNG CHIEF ECONOMIST	40 00				X			208,523	0	40,784	
DONALD M LIPTON DIRECTOR, PUBLIC RELATIO	40 00				X			169,279	0	34,254	
BRADLEY J ECKART DIRECTOR, ORGANIZATION D	40 00				X			164,887	0	52,041	
Mary Kay Thatcher Director, Public Policy	40 00					X		162,699	0	26,819	
Rosemarie Watkins director, public Policy	40 00					X		149,948	0	26,561	
Paul Schegel director, public Policy	40 00					X		144,289	0	21,562	
Richard Krause Sr Director, Public Poli	40 00					X		138,986	0	28,699	
David Francis Director, IT & communica	40 00					X		132,685	0	32,065	
1b Total								3,083,929	0	572,227	

2

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization▶35

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
		Yes	No
			No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address		(B) Description of services	(C) Compensation
CROWELL & MORING LLP 1001 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004		AFBF LLC LEGAL SERVICES	173,685
ROYLANCE ABRAMS BERDO & GOODMAN LLC 1300 19TH STREET NW SUITE 600 WASHINGTON, DC 20036		AFBF LEGAL SERVICES	163,358
VISUALEYES CORPORATION 22842 SOUTH HARLEM AVENUE FRANKFORT, IL 60423		AFBF AUDIO VIDEO SERVICES	155,364
MAYER BROWN LLP 1999 K STREET NW WASHINGTON, DC 20006		AFBF LLC LEGAL SERVICES	131,094
2	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶4		



Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues . . . . .	1b				
	c	Fundraising events . . . . .	1c				
	d	Related organizations . . . . .	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f . . . . .					
Program Service Revenue	2a	MEMBERSHIP DUES	Business Code 900,099	25,110,656	25,110,656		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f . . . . .		25,110,656			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		836,663		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties . . . . .					
6a		Gross Rents	(i) Real 206,541	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)	206,541				
d		Net rental income or (loss) . . . . .		206,541			206,541
7a		Gross amount from sales of assets other than inventory	(i) Securities 7,500,000	(ii) Other			
b		Less cost or other basis and sales expenses	7,534,765	4,016			
c		Gain or (loss)	-34,765	-4,016			
d		Net gain or (loss) . . . . .		-38,781			-38,781
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a				
b		Less direct expenses . . . . .	b				
c		Net income or (loss) from fundraising events . .					
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a				
b		Less direct expenses . . . . .	b				
c		Net income or (loss) from gaming activities . .					
10a		Gross sales of inventory, less returns and allowances . . . . .	a				
b		Less cost of goods sold . . . . .	b				
c		Net income or (loss) from sales of inventory . .					
	Miscellaneous Revenue	Business Code					
11a							
b							
c							
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . .			26,115,079	25,110,656	0	1,004,423

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	447,000			
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	2,791,845			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7	Other salaries and wages	7,302,383			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .				
9	Other employee benefits . . . . .	3,601,569			
10	Payroll taxes . . . . .	680,877			
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	923,535			
c	Accounting . . . . .	185,697			
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .				
g	Other . . . . .				
12	Advertising and promotion . . . . .	417,012			
13	Office expenses . . . . .	234,520			
14	Information technology . . . . .				
15	Royalties . . . . .				
16	Occupancy . . . . .	2,815,761			
17	Travel . . . . .	3,072,197			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .				
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	736,253			
23	Insurance . . . . .	136,456			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a	PROGRAMS	1,523,226			
b	OUTSIDE SERVICES AND CO	370,558			
c	faRM BUREAU NETWORK	255,191			
d	DUES AND SUBSCRIPTIONS	214,751			
e	TELEPHONE	113,419			
f	All other expenses	-315,411			
25	Total functional expenses. Add lines 1 through 24f	25,506,839			
26	Joint Costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			6,374,500	1	7,095,637
	2	Savings and temporary cash investments . . . . .			6,846,354	2	6,540,382
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			296,562	4	286,125
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			551,514	9	446,569
	10a	Land, buildings, and equipment cost basis	10a	8,767,092			
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .	10b	3,676,635	5,522,457	10c	5,090,457
	11	Investments—publicly traded securities . . . . .			11,275,032	11	9,967,776
	12	Investments—other securities See Part IV, line 11 . . . . .			9,070,873	12	9,997,018
	13	Investments—program-related See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets See Part IV, line 11 . . . . .			1,776,931	15	272,310
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .			41,714,223	16	39,696,274
Liabilities	17	Accounts payable and accrued expenses . . . . .			1,064,026	17	1,304,962
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			56,737	19	61,030
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				23	
	24	Unsecured notes and loans payable . . . . .				24	
	25	Other liabilities <i>Complete Part X of Schedule D</i> . . . . .			3,234,261	25	3,325,778
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .			4,355,024	26	4,691,770
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>						
	27	Unrestricted net assets . . . . .			37,359,199	27	35,004,504
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	<b>Total net assets or fund balances</b> . . . . .			37,359,199	33	35,004,504
	34	<b>Total liabilities and net assets/fund balances</b> . . . . .			41,714,223	34	39,696,274

Part XI

Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	2a	No
b	Were the organization's financial statements audited by an independent accountant? . . . . .	2b	Yes
c	If "Yes" to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	3a	No
b	If "Yes," did the organization undergo the required audit or audits? . . . . .	3b	

Additional Data

Software ID:  
Software Version:  
EIN: 36-0725160  
Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PROGRAMS	1,523,226			
OUTSIDE SERVICES AND CO	370,558			
faRM BUREAU NETWORK	255,191			
DUES AND SUBSCRIPTIONS	214,751			
TELEPHONE	113,419			

SCHEDULE C (Form 990 or 990-EZ)  Department of the Treasury Internal Revenue Service	Political Campaign and Lobbying Activities	OMB No 1545-0047
	For Organizations Exempt From Income Tax Under section 501(c) and section 527	2008
	To be completed by organizations described below. Attach to Form 990 or Form 990-EZ	Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

• Section 501(c)(3) organizations    complete Parts I-A and B    Do not complete Part I-C

• Section 501(c) (other than section 501(c)(3)) organizations    complete Parts I-A and C below    Do not complete Part I-B

• Section 527 organizations    complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h))    complete Part II-A    Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h))    Complete Part II-B    Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax)

• Section 501(c)(4), (5), or (6) organizations    complete Part III

Name of the organization AMERICAN FARM BUREAU FEDERATION	Employer identification number  36-0725160
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Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	\$ _____
3	Volunteer hours	_____

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$ _____
3	If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$ _____
2	Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities	\$ _____
3	Total of direct and indirect exempt function expenditures    Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b	\$ _____
4	Did the filing organization file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made    Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC)    If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A

To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

A Check ☐ if the filing organization belongs to an affiliated group

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is:			
Not over \$500,000			
Over \$500,000 but not over \$1,000,000			
Over \$1,000,000 but not over \$1,500,000			
Over \$1,500,000 but not over \$17,000,000			
Over \$17,000,000			
The lobbying nontaxable amount is: 20% of the amount on line 1e			
\$100,000 plus 15% of the excess over \$500,000			
\$175,000 plus 10% of the excess over \$1,000,000			
\$225,000 plus 5% of the excess over \$1,500,000			
\$1,000,000			
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a Enter -0- if line g is more than line a			
i Subtract line 1f from line 1c Enter -0- if line f is more than line c			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line d, column (e))					
f Grassroots lobbying expenditures					

**Part II-B**    **To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines c through i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
<b>i</b>	Other activities. If "Yes," describe in Part IV.			
<b>j</b>	Total lines 1c through 1i.			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes" enter the amount of any tax incurred under section 4912.			
<b>c</b>	If "Yes" enter the amount of any tax incurred by organization managers under section 4912.			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A**    **To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** (See the instructions for Schedule C for details.)

		Yes	No
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b> Yes	
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	No
<b>3</b>	Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	No

**Part III-B**    **To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** (See the instructions for Schedule C for details.)

<b>1</b>	Dues, assessments and similar amounts from members	1 \$
<b>2</b>	Section 162(e) non-deductible lobbying and political expenditures <b>(do not include amounts of political expenses for which the section 527(f) tax was paid).</b>	
<b>a</b>	Current Year	2a \$
<b>b</b>	Carryover from last year	2b \$
<b>c</b>	Total	2c \$
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
<b>4</b>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
<b>5</b>	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$

**Part IV**    **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

## Supplemental Information

Identifier	Return Reference	Explanation
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SCHEDULE D

(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008

Open to Public Inspection

**Name of the organization**  
AMERICAN FARM BUREAU FEDERATION

**Employer identification number**  
  
36-0725160

**Part I**

**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	<b>(a)</b> Donor advised funds	<b>(b)</b> Funds and other accounts
<b>1</b>	Total number at end of year	
<b>2</b>	Aggregate contributions to (during year)	
<b>3</b>	Aggregate grants from (during year)	
<b>4</b>	Aggregate value at end of year	
<b>5</b>	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> <b>Yes</b><input type="checkbox"/> <b>No</b></div>	
<b>6</b>	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <div><input type="checkbox"/> <b>Yes</b><input type="checkbox"/> <b>No</b></div>	

**Part II**

**Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

**1**

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area☐ Protection of natural habitat☐ Preservation of certified historic structure☐ Preservation of open space

**2**

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	<b>Held at the End of the Year</b>
<b>a</b>	

 Total number of conservation easements | **2a** |  || **b** |

 Total acreage restricted by conservation easements | **2b** |  || **c** |

**3**

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

**4**

Number of states where property subject to conservation easement is located ▶

**5**

Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

☐ **Yes**☐ **No**

**6**

Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

**7**

Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$

**8**

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ **Yes**☐ **No**

**9**

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

**Part III**

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

**1a**

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

**b**

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

**(i)** Revenues included in Form 990, Part VIII, line 1

▶ \$

**(ii)** Assets included in Form 990, Part X

▶ \$

**2**

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

**a**

Revenues included in Form 990, Part VIII, line 1

▶ \$

**b**

Assets included in Form 990, Part X

▶ \$

For Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2008

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

3a(i)

Yes

No

(ii) related organizations . . . . .

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		5,407,963	1,259,328	4,148,635
d Equipment . . . . .		1,010,327	788,570	221,757
e Other . . . . .		2,348,802	1,628,737	720,065
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				5,090,457

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests	8,997,018	F
Other FARM BUREAU BANCORP SUBORDINATED DEBT NOTE	1,000,000	F
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12 ) ▶	9,997,018	

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13 )		

(a) Description	(b) Book value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

(a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED RENT EXPENSE	1,432,886
DEFERRED LEASE INCENTIVE	1,892,892
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25 )	3,325,778

**Schedule D (Form 990) 2008**

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,115,079
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	25,506,839
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	608,240
4	Net unrealized gains (losses) on investments	4	804,364
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,767,299
9	Total adjustments (net) Add lines 4 - 8	9	-2,962,935
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,354,695

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	26,383,915
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains on investments . . . . .	2a	804,364
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	-535,425
e	Add lines 2a through 2d . . . . .	2e	268,939
3	Subtract line 2e from line 1 . . . . .	3	26,114,976
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	103
c	Add lines 4a and 4b . . . . .	4c	103
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	26,115,079

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	25,020,598
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Losses reported on Form 990, Part IX, line 25 . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	4,016
e	Add lines 2a through 2d . . . . .	2e	4,016
3	Subtract line 2e from line 1 . . . . .	3	25,016,582
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	490,257
c	Add lines 4a and 4b . . . . .	4c	490,257
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	25,506,839

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES - 73857 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST -3693442
Part XII, Line 2d - Other Adjustments		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES - 535425
Part XII, Line 4b - Other Adjustments		INVESTMENT INCOME FROM AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 4119 LOSS ON SALE OF PROPERTY AND EQUIPMENT -4016
Part XIII, Line 2d - Other Adjustments		LOSS ON SALE OF PROPERTY AND EQUIPMENT 4016
Part XIII, Line 4b - Other Adjustments		EXPENSES OF AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 490257

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AMERICAN FARM BUREAU FEDERATION

Grants and Other Assistance to Organizations,  
Governments and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

OMB No 1545-0047

2008

Open to Public  
Inspection

Employer identification number  
36-0725160

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed . . . . . ☐

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations . . . . .

8

3

Enter total number of other organizations . . . . .

6

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.  
See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 CONTRIBUTIONS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS DURING THE BUDGET APPROVAL PROCESS THE CONTRIBUTIONS APPROVED BY THE BOARD MEET THE MISSION OF THE ORGANIZATION SINCE THE FUNDS ARE TO BE USED FOR THE GENERAL SUPPORT OF AGRICULTURAL PROGRAMS, THE RECIPIENTS ARE NOT REQUIRED TO SUBSTANTIATE THEIR EXPENDITURES RELATED TO THESE CONTRIBUTIONS

Software ID:

Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL AGRICULTURE ALLIANCEPO BOX 9522 Arlington, VA 22209	54-1384916	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
BOB GRAY LLC6435 ALDERMAN DRIVE ALEXANDRIA, VA 22315	54-2014614		5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
COUNCIL FOR AGRICULTURAL SCIENCE & TECHNOLOGY4420 W LINCOLN WAY AMES, IA 50014	23-7186154	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
NAT'L FARM-CITY COUN-SPONSORSHIP600 MARYLAND AVENUE SW WASHINGTON, DC 20024	36-6107924	501(C)(3)	6,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
POLICY DIRECTIONS INC 818 CONNECTICUT AVE NW WASHINGTON, DC 20006	52-1907369		6,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
LAA818 CONNECTICUT AVE NW WASHINGTON, DC 20006	20-2635587		7,500				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
MINOR CROP FARMERS ALLIANCE1901 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	54-1608554	501(C)(6)	7,500				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
CONGRESSIONAL SPORTSMEN'S FOUNDATION110 NORTH CAROLINA AVE SE WASHINGTON, DC 20003	52-1686163	501(C)(3)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
EDISON ELECTIC INSTITUTE701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	13-0659550	501(C)(6)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
US CHAMBER OF COMMERCE1615 H STREET NW ROOM 460 WASHINGTON, DC 20062	53-0045720	501(C)(6)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARTLAND INSTITUTE 19 SOUTH LASALLE STREET CHICAGO, IL 60603	36-3309812	501(C)(3)	18,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
NATIONAL FFA FOUNDATION 6060 FFA DRIVE INDIANAPOLIS, IN 46268	54-6044662	501(C)(3)	42,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURAL 600 MARYLAND AVENUE SW WASHINGTON, DC 20024	36-6169577	501(C)(3)	115,000	190,437	FMV	DONATED SERVICES	GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
KVIE-19348 PO BOX 6 SACRAMENTO, CA 95812	94-1421463	501(C)(3)	200,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS



Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization  
AMERICAN FARM BUREAU FEDERATION

Employer identification number  
36-0725160

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	<div><div><input type="checkbox"/> First class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div></div>			
	<div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div></div>			
	<div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div></div>			
	<div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div></div>			
	<div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div></div>			
	<div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
BOB STALLMAN	(i)	440,915			56,766	9,619	507,300	
	(ii)							
Richard Newpher	(i)	307,868			58,778	9,619	376,265	
	(ii)							
Julie Anna Potts	(i)	214,376			40,159	9,214	263,749	
	(ii)							
C David Mayfield	(i)	182,867			32,971	9,769	225,607	
	(ii)							
DAVID P CONOVER	(i)	226,253			36,357	9,967	272,577	
	(ii)							
MARK A MASLYN	(i)	213,004			26,883	9,340	249,227	
	(ii)							
ROBERT E YOUNG	(i)	208,523			30,879	9,905	249,307	
	(ii)							
DONALD M LIPTON	(i)	169,279			24,971	9,283	203,533	
	(ii)							
BRADLEY J ECKART	(i)	164,887			38,796	13,245	216,928	
	(ii)							
Mary Kay Thatcher	(i)	162,699			20,120	6,699	189,518	
	(ii)							
Rosemarie Watkins	(i)	149,948			21,161	5,400	176,509	
	(ii)							
Paul Schegel	(i)	144,289			20,401	1,161	165,851	
	(ii)							
Richard Krause	(i)	138,986			19,688	9,011	167,685	
	(ii)							
David Francis	(i)	132,685			22,607	9,458	164,750	
	(ii)							
	(i)							
	(ii)							

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

**Schedule J (Form 990) 2008**

Software ID:

Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
BOB STALLMAN	(i) (ii)	440,915			56,766	9,619	507,300	
Richard Newpher	(i) (ii)	307,868			58,778	9,619	376,265	
Julie Anna Potts	(i) (ii)	214,376			40,159	9,214	263,749	
C David Mayfield	(i) (ii)	182,867			32,971	9,769	225,607	
DAVID P CONOVER	(i) (ii)	226,253			36,357	9,967	272,577	
MARK A MASLYN	(i) (ii)	213,004			26,883	9,340	249,227	
ROBERT E YOUNG	(i) (ii)	208,523			30,879	9,905	249,307	
DONALD M LIPTON	(i) (ii)	169,279			24,971	9,283	203,533	
BRADLEY J ECKART	(i) (ii)	164,887			38,796	13,245	216,928	
Mary Kay Thatcher	(i) (ii)	162,699			20,120	6,699	189,518	
Rosemarie Watkins	(i) (ii)	149,948			21,161	5,400	176,509	
Paul Schegel	(i) (ii)	144,289			20,401	1,161	165,851	
Richard Krause	(i) (ii)	138,986			19,688	9,011	167,685	
David Francis	(i) (ii)	132,685			22,607	9,458	164,750	

SCHEDULE O  
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

AMERICAN FARM BUREAU FEDERATION

Employer identification number

36-0725160

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		AFBF members are the State Farm Bureau's and Presidents of those State Farm Bureau's sit on AFBF Board of Directors Thirty-one of the Board Members of AFBF are State Farm Bureau Presidents The board positions are determined based on the follow ing interpretation of Section 4, Article VIII of the AFBF bylaw s Total membership - Board Positions Under 200,001 - 4 200,001 - 600,000 - 5 600,001 - 1,000,000 - 6 1,000,001 - 1,400,000 - 7 1,400,001 - 1,800,000 - 8 1,800,001 - 2,200,000 - 9 2,200,001 - 2,600,000 - 10 2,600,001 - 3,000,000 - 11 3,000,001 - 3,400,000 - 12 3,400,001 - 3,800,000 - 13 3,800,001 - 4,200,000 - 14 The Board Positions are determined by the 4 Regions Northeast Midw est West South In addition to the 4 regions and membership determining the number of board positions for each of the regions - the AFBF Women's Committee Chairman and AFBF YF&R's Committee Chairman also have a seat on the AFBF's Board of Directors

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		SEE RESPONSE TO PART VI, SECTION A, QUESTION 6

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		GOVERNING BODY REVIEW OF THE FORM 990 - THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE AND REV IEW THE ORGANIZATION'S FORM 990 MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND PROVIDES A FULL COPY TO THE EXECUTIVE COMMITTEE OF THE ORGANIZATION THE EXECUTIVE COMMITTEE MEETS WITH MANAGEMENT TO REVIEW THE FORM 990 THE FORM 990 IS FILED AFTER THE EXECUTIVE COMMITTEE REVIEW THE EXECUTIVE COMMITTEE REPORTS TO THE ENTIRE BOARD THAT THE FORM 990 WAS REVIEWED

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		OFFICERS, DIRECTORS AND EMPLOYEES ARE ANNUALLY REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AS A PRESCURSOR TO THEIR SERVICE TO THE ORGANIZATION POTENTIAL CONFLICTS ARE LOGGED WITH AND MONITORED BY THE SECRETARY OF THE BOARD

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Process of Determining Compensation - A Salary Administration Program has been developed by American Farm Bureau Federation for the administration of pay decisions to ensure that employees covered by the program are paid according to fair, equitable and uniform principles This program has been adopted by the organizations board of directors In mid-October, Human Resources prepares a report, by department, that includes the follow ing Current Salary Current Grade Midpoint of Grade % - Current Salary to Midpoint Columns are added for the addition of Recommended Increases and formulas for a new Salary and new % of Salary to Midpoint The spreadsheet is then sent to the Executive Vice President Midpoint is determined by the current salary structure The ranges are review ed each year and may be shifted in accordance with salary survey data provided each year by PriceWaterhouseCoopers We ask for data on expected salary increases for the next year and expected shifts in salary grades The Executive Vice President gives Human Resources an allow ance for each department's salary increases This is generally in the form of a percent of current total salaries for the department Human Resources includes the number in the spreadsheet, breaks out each department's information, then sends the appropriate report to each Department Manager along w ith instructions and deadlines for completion Department Managers complete the spreadsheet w ith their recommendations for employee salary increases and return it to Human Resources Human Resources review s the recommendations and makes notes for the Executive Vice President review The notes might include draw ing his attention to matters of internal equity, or salary history (like if an employee w as promoted and had a recent salary increase) The Executive Vice President may follow up w ith the Department Manager for further explanations and make changes Once the document is finalized, Human Resources provides an updated copy for Executive Vice President's signature Copies are given then to the Director of Accounting and Payroll for their files The employee's compensation is included in the yearly budget process w hich is review ed and approved by the board of directors The President's Salary is review ed by the Executive Committee and they make the recommendation to the Board of Directors w ho then Approve the Salary

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		GOVERNING DOCUMENTS - FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.  
▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization  
AMERICAN FARM BUREAU FEDERATION

Employer identification number  
36-0725160

Part I Identification of Disregarded Entities					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
AFBF LEGAL ADVOCACY PROGRAM LLC 600 MARYLAND AVE SW SUITE 1000 WASHINGTON, DC 20024 65-1294705	POLICY LITIGATION	DE	4,119	2,481,523	

Part II Identification of Related Tax-Exempt Organizations					
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE  600 MARYLAND AVE SW STE 1000 washington, DC20024 36-6169577	ACCUMULATES & DISTRIB FUNDS FOR MATERIALS,PROGRAM DEV grants and education	IL	501 (c) (3)	509 (a)(3)	

Part III

Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
AMERICAN FARM BUREAU INC (AFBI) 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC20024 36-3250406	BUSINESS MANAGEMENT	DC		C	259,355	1,679,026	100 000 %
AMERICAN AGRICULTURAL MARKETING ASSOCIATION 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC20024 36-2433284	AG MARKETING SERVICES	DC		C	32	8,851	53 500 %

Part V

Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

Yes

1n

Yes

1o

Yes

1p

Yes

1q

No

1r

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds		
(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE	B	305,437
(2) american farm bureau inc	P	165,309
(3) amencan agricultural marketing association	O	1,000
(4) american FARM BUREAU FOUNDATION FOR AGRICULTURE	O	121,310
(5)		
(6)		

Schedule R (Form 990) 2008



Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]